AG	ORD. CERTIF	ICATE OF	N	SURAN	Œ	issue	DATE (I	MM/DD/YY)									
Meeker Sharkey & MacBean 21 Commerce Drive Cranford, NJ 07016 908-272-8100			THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.  COMPANIES AFFORDING COVERAGE  COMPANY A  St. Paul Fire & Marine  COMPANY B														
												COMPANY					
									Soc.Hill @ University Hts.!!! c/o Eastern Community Mgmt			LETTER C					
									225 Highway 35			COMPANY D					
									Red Bank NJ 97701			COLDANY					
143	NJ 07701			LETTER" E													
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHST ANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWNMAY HAVE BEEN REDUCED BY PAID CLAMS  TYPE OF INSURANCE  POLICY MARKET  POLICY EFFECTIVE POLICY EXPRATION  LIMITS																	
LTR	TYPE OF INSURANCE	POLICY NUMBER		POLICY EFFECTIVE DATE (MM/DD/YY)	DATE (MM/DD/VV)	FiMI	18										
GEN	ERAL LIABILITY					GENERAL AGGREGATE	\$	5000000									
A X		BINDER 355764	1	1/01/94	1/01/95	PRODUCTS-COMP/OP AGG.	1	3000000									
	CLAIMS MADE X OCCUR.					PERSONAL & ADV INJURY	\$	3000000									
	OWNER'S & CONTRACTOR'S PROT.					FIRE DAMAGE (Any one fire)	3	3000000 50000									
╎├─┘						MED EXPENSE (Any one person	<del></del>	5000									
AUTO	MOBILE LIABILITY					COMBINED SINGLE	\$										
	ANY AUTO		9				-	· · · · · · · · · · · · · · · · · · ·									
-	ALL OWNED AUTOS SCHEDULED AUTOS					BODILY INJURY (Per person)	*										
	HIRED AUTOS					BODILY INJURY	•										
	NON-OWNED AUTOS					(Per accident)	Ľ										
	GARAGE LIABILITY					PROPERTY DAMAGE	\$										
EXC	ESSLIABILITY					EACH OCCURRENCE	8										
	UMBRELLA FORM					AGGREGATE	\$										
	OTHER THAN UMBRELLA FORM	-															
	WORKER'S COMPENSATION					STATUTORY LIMITS											
	AND					EACH ACCIDENT	3	<del></del>									
	EMPLOYERS' LIABILITY					DISEASE-POLICY LIMIT DISEASE-EACH EMPLOYEE	1										
	er anket Building & ntents	BINDER #355764		1/01/94	1/01/95	\$11,475,000.	<u> </u>										
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS  CWINER: CLENN BRYANT, SR. AND CLADYS BRYANT, H/W Fidelity Limit: \$100,000.  LOC: 33 MARROW SIREET, NEWARK, NJ 07103 (17D) LOT: 17.04 BLOCK: 406																	
CANCELLATION  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF. THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTENNOTICE TO THE CERTIFICATE HOLDERNAMED TO THE INTEREST MAY APPEAR ONE INDUSTRIAL WAY WEST, BLDG. D EATONTOWN, NJ 07724  CANCELLATION  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF. THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTENNOTICE TO THE CERTIFICATE HOLDERNAMED TO THE LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES  AUTHORIZED REPRESENTATIVE																	
EATONTOWN, NJ 07/24 AUTHORIZED REPRESENTATIVE DELLA COLONIAL 010036000																	